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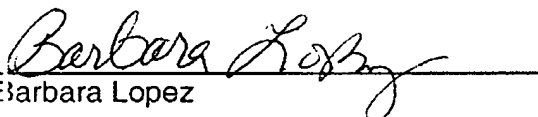
Name: Commissioner of Patents
Art Unit: 3611
Examiner: Cassandra Davis
Phone:

From: Tom H. Dao
Reg No. 44,641

Re: Application No. 10/692,705
Filed October 23, 2003
Entitled APPARATUS AND METHOD FOR RECORDING CONSUMED
DOSAGES

File: 9254195/THD/D125

I HEREBY CERTIFY THAT THIS PAPER IS BEING FACSIMILE TRANSMITTED TO
THE UNITED STATES PATENT AND TRADEMARK OFFICE ON April 13, 2005.


Barbara Lopez

*Correspondence: **AMENDMENT AND RESPONSE TO RESTRICTION
REQUIREMENT (8 pgs) and AMENDMENT TRANSMITTAL (2 pgs)**

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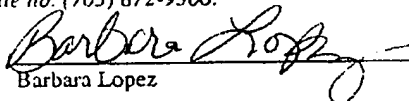
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PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
AMENDMENT TRANSMITTAL LETTER**

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Barbara Lopez

Applicant : Tom Dao
 Application No. : 10/692,705
 Filed : October 23, 2003
 Title : APPARATUS AND METHOD FOR RECORDING CONSUMED DOSAGES

Confirmation No. 9789

Grp./Div. : 3611
 Examiner : Cassandra Davis

Docket No. : 9254195/THD/D125

Mail Stop: Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Post Office Box 7068
 Pasadena, CA 91109-7068
 April 13, 2005

Commissioner:

Enclosed is an amendment to the above-identified application.

CLAIMS AS AMENDED						
	Claims Remaining After Amendment	Highest Number Paid For	Number Extra Claims	Small Entity Rate	Large Entity Rate	FEE
Total Claims Fee	31	* 31	0	x \$25.00	x \$50.00	0
Independent Claims	4	** 4	0	x \$100.00	x \$200.00	0
Multiple Dependent Claims ***				\$180.00	\$360.00	
TOTAL FILING FEE						0
NO ADDITIONAL FEE REQUIRED	IF NO FEE REQUIRED, INSERT "0"					0
LIST INDEPENDENT CLAIMS: 1, 11, 19 & 31						
* IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 20 OR LESS, WRITE "20" IN COLUMN 3 ** IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 3 OR LESS, WRITE "3" IN COLUMN 3 *** PAY THIS FEE ONLY WHEN MULTIPLE DEPENDENT CLAIMS ARE ADDED FOR THE FIRST TIME						

Attached is our check for \$ to pay the fees calculated above.

A Petition for Extension of Time and the required fee are enclosed.

Other enclosures:

Amendment Transmittal Letter
Application No. 10/692,705


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The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required by or to give effect to this paper to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account.

Respectfully submitted,

CHRISTIE PARKER & HALE, L.L.P.

By



Tom H. Dao
Reg. No. 44,641
626/795-9900

THD/bl

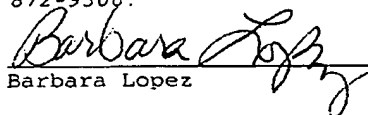
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Barbara Lopez

Appl No. : 10/692,705 Confirmation No. 9789
Applicant : Tom Dao
Filed : October 23, 2003
Title : APPARATUS AND METHOD FOR RECORDING CONSUMED
DOSAGES
TC/A.U. : 3611
Examiner : Cassandra Davis
Docket No. : 9254195/THD/D125

**AMENDMENT AND
RESPONSE TO RESTRICTION REQUIREMENT**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

100 Retreat
Irvine, CA 92603
April 13, 2005

Commissioner:

In response to the Office action of March 28, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.